

**Abstract 239**

**TITLE:** Repeat HIV Testing, Subsequent Risk Behaviors, and HIV Seroconversion Among Young Men Who Have Sex with Men: Implications for HIV Prevention Counseling

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**BACKGROUND/OBJECTIVES:** Although many young men who have sex with men (MSM) repeatedly test for HIV, limited information is available on the prevention outcomes of repeat testing. Our objectives are to compare repeat testers ( $\geq 3$  HIV tests) with occasional testers (1-2 HIV tests) on subsequent risk behaviors, prevention beliefs, and rate of HIV seroconversion among young MSM sampled in 7 U.S. urban areas from 1994-1998.

**METHODS:** The Young Men's Survey was a cross-sectional, community-based, probability survey of 15- to 22-year-old MSM who attend public venues (e.g., dance clubs). In a van parked near sampled venues, participants were tested for HIV, and were interviewed on HIV testing patterns, prevention beliefs, and risk behaviors in the preceding 6 months (reporting period).

**RESULTS:** Of 1146 participants who reported having one or more negative HIV test results before the reporting period, 791 (69%) had tested one or two times and 355 (31%) had tested 3 or more times (median: 4; range: 3-40). During the reporting period, repeat testers were as likely as occasional testers to report having 3 or more male sex partners (48% vs. 45%); having one or more casual (57% vs. 59%) or exchange (13% vs. 11%) partners; engaging in oral sex without a condom (83% vs. 82%); having anal sex with casual partners (44% vs. 41%) and having unprotected anal sex with casual partners of unknown serostatus (15% vs. 14%). Controlling for site, age, and race, repeat testers were more likely to report engaging in anal sex with steady partners (66% vs. 59%,  $p = .005$ ), having unprotected anal sex with steady partners of unknown serostatus (23% vs. 17%,  $p = .016$ ); and being high on marijuana (35% vs. 28%,  $p = .032$ ) or cocaine (14% vs. 6%,  $p = .001$ ) during sex. Repeat testers did not score significantly higher than occasional testers on perceived risk, and safer sex and sexual-communication self-efficacy. The proportion of young MSM who subsequently acquired HIV infection (seroconverted) was somewhat higher among repeat testers compared with occasional testers (10% vs. 7%,  $p = .13$ ).

**CONCLUSIONS:** Repeat HIV testing is not associated with increased safer sex and communication self-efficacy, and reduced risk perception, risk behavior, and rate of HIV seroconversion. Repeat testing is associated with several HIV risk behaviors. Prevention counselors should assess repeat-testing behavior on all persons who undergo HIV testing and intensify efforts to address reasons for continued risk.

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